

Work Order ID 124259

September-11-14 12:00:17 PM

124259

Page 1

Item ID: D3639-1

Accept

N900040100

Setup Start

NS1

Revision ID:

Item Name: Doubler

Stop

NS2

Start Date: 9/10/14

Start Qty: 4.00

4

Cust Item ID:

Required Date: 9/10/14

Req'd Qty: 4.00

4

Customer:

Reference:

Approvals:

Process Plan: MLJ

Date: 1409-16

Tooling:

Date:

Run Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
D3639	Rev A

100

100

FLOW WATER JET

Waterjet

Memo

0.00

5

DC 14/10/14

FLOW CNC Waterjet

1-Cut as per Dwg D3639 Dwg Rev: A Prog Rev: A 2-
Deburr if necessary

110

110

QC2- Inspect parts off machine FAI/FAIB

QC

Quality Control

Memo

0.00

5

2/10/14/10/14

120

120

QC8- Inspect parts - second check

QC

Quality Control

Memo

0.00

(5)

DAS
38
9:59 AM

OCT 20 2014

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only

Work Order: _____	DISPOSITION			AGAINST DEPARTMENT/PROCESS						
Part No. _____	Rework	<input type="checkbox"/>	Skid-tube	<input type="checkbox"/>	Crosstube	<input type="checkbox"/>	Water Jet	<input type="checkbox"/>	Engineering	<input type="checkbox"/>
NCR No. _____	Scrap	<input type="checkbox"/>	Machining	<input type="checkbox"/>	Small Fab	<input type="checkbox"/>	Prod. Eng. Coor.	<input type="checkbox"/>	Quality	<input type="checkbox"/>
	Use-as-is	<input type="checkbox"/>	Thermoforming	<input type="checkbox"/>	Finishing	<input type="checkbox"/>	Rec/Store/Packaging	<input type="checkbox"/>	Other	<input type="checkbox"/>
	Suspected Unapproved	<input type="checkbox"/>	Large Fab	<input type="checkbox"/>	Composite	<input type="checkbox"/>	Supplier	<input type="checkbox"/>		

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear		General							
Bending	<input type="checkbox"/>	Bend	<input type="checkbox"/>	Folio/Program	<input type="checkbox"/>	Outside Dimensions	<input type="checkbox"/>	Pressure/Forced	<input type="checkbox"/>
Centre Not Concentric	<input type="checkbox"/>	BOM/Route	<input type="checkbox"/>	Grain	<input type="checkbox"/>	Over/Under tolerance	<input type="checkbox"/>	Set-up	<input type="checkbox"/>
Cracks	<input type="checkbox"/>	Broken/Damage/Defect	<input type="checkbox"/>	Hardware	<input type="checkbox"/>	Part Incorrect	<input type="checkbox"/>	Temperature/Cure	<input type="checkbox"/>
Crimp/Kink/Ripple/Wave	<input type="checkbox"/>	Burrs	<input type="checkbox"/>	Inspection Incomplete/Unqualified	<input type="checkbox"/>	Part Lost/Missing	<input type="checkbox"/>	Weld	<input type="checkbox"/>
Cuffs	<input type="checkbox"/>	Contamination	<input type="checkbox"/>	Instructions Incomplete/Unclear	<input type="checkbox"/>	Part Moved	<input type="checkbox"/>	Wrong Stock Pulled	<input type="checkbox"/>
Crushing	<input type="checkbox"/>	Countersink	<input type="checkbox"/>	Misaligned/off center	<input type="checkbox"/>	Positioned Wrong	<input type="checkbox"/>		<input type="checkbox"/>
Heat Treat	<input type="checkbox"/>	Cut Too Short	<input type="checkbox"/>	Mislabeled	<input type="checkbox"/>	Power Loss/Surge	<input type="checkbox"/>		<input type="checkbox"/>
Inspection Strip in Tube	<input type="checkbox"/>	Drawing	<input type="checkbox"/>	Misread	<input type="checkbox"/>	Other	<input type="checkbox"/>		<input type="checkbox"/>
Marks/Chatter	<input type="checkbox"/>	Drill Holes	<input type="checkbox"/>	Off-set	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
Turning Sequence	<input type="checkbox"/>	Finish	<input type="checkbox"/>	Out of Calibration	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
Wave/Twist in Tube	<input type="checkbox"/>	Fit/Function	<input type="checkbox"/>	Out of Sequence	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>

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Page 2

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4

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run

Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

130

130

Brake NC

NC BRAKE

0.00

DAS
30
9-89

14/10/23

Brake NC

Memo

0.00

Form as per Dwg D3639

140

140

QC

Quality Control

QC5- Inspect part completeness to step on W/O

0.00

DAS
38
9-89

(5)

OCT 24 2014

150

150

HandFinish

Hand Finishing

Chemical Conversion Coat per QSI005 4.1

0.00

Memo

0.00

x5 f M 14/10/2014

DQA:

Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed:

Date: _____

Work Order update only

Work Order: _____	Part No. _____	NCR No. _____
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DISPOSITION

- Rework
- Scrap
- Use-as-is
- Suspected Unapproved

AGAINST DEPARTMENT/PROCESS

- | | | | |
|---------------|-----------|---------------------|-------------|
| Skid-tube | Crosstube | Water Jet | Engineering |
| Machining | Small Fab | Prod. Eng. Coor. | Quality |
| Thermoforming | Finishing | Rec/Store/Packaging | Other |
| Large Fab | Composite | Supplier | |

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear	General		
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Folio/Program	<input type="checkbox"/> Outside Dimensions
<input type="checkbox"/> Centre Not Concentric	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Grain	<input type="checkbox"/> Over/Under tolerance
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damage/Defect	<input type="checkbox"/> Hardware	<input type="checkbox"/> Part Incorrect
<input type="checkbox"/> Crimp/Kink/Ripple/Wave	<input type="checkbox"/> Burrs	<input type="checkbox"/> Inspection Incomplete/Unqualified	<input type="checkbox"/> Part Lost/Missing
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Moved
<input type="checkbox"/> Crushing	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misaligned/off center	<input type="checkbox"/> Positioned Wrong
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Power Loss/Surge
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Drawing	<input type="checkbox"/> Misread	<input type="checkbox"/> Other
<input type="checkbox"/> Marks/Chatter	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Off-set	
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Calibration	
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Fit/Function	<input type="checkbox"/> Out of Sequence	

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Page 3

September-11-14 12:00:17 PM

Item ID: D3639-1

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Setup

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Start Date: 9/10/14

Start Qty: 4.00

4

Cust Item ID:

Required Date: 9/10/14

Req'd Qty: 4.00

4

Customer:

Reference:

Approvals: Process Plan: _____

Date: _____

Tooling: _____

Date: _____

Run

Start

NR1

QC: _____

Date: _____

SPC (Y/N): _____

Date: _____

Stop

NR2

**Sequence ID/
Work Center ID**

**Operation
Description**

160

QC3 Inspect Part Finish

160

QC

Quality Control

**Set Up/
Run Hours**

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

0.00

(5)

DAS

38

9-89

170

Identify as per dwg & Stock Location 81054 0.00

170

Packaging

Packaging

Memo

0.00

5x Sp14-10-28

180

QC21- Final Inspection - Work Order Release

0.00

180

QC

Quality Control

Memo

0.00

14/10/29 JJ

BB 4-10-29

DQA:

Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed:

Date: _____

Work Order update only

<p>Work Order: _____</p> <p>Part No. _____</p> <p>NCR No. _____</p>	DISPOSITION <input type="checkbox"/> Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved	AGAINST DEPARTMENT/PROCESS <input type="checkbox"/> Skid-tube <input type="checkbox"/> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Large Fab <input type="checkbox"/> Composite <input type="checkbox"/> Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY									
Landing Gear					General				
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Folio/Program	<input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Pressure/Forced	<input type="checkbox"/> Centre Not Concentric	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Set-up	<input type="checkbox"/> Temperature/Cure
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damage/Defect	<input type="checkbox"/> Grain	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Weld	<input type="checkbox"/> Crimp/Kink/Ripple/Wave	<input type="checkbox"/> Burrs	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Wrong Stock Pulled	<input type="checkbox"/> Contamination
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Countersink	<input type="checkbox"/> Inspection Incomplete/Unqualified	<input type="checkbox"/> Part Moved	<input type="checkbox"/> Other	<input type="checkbox"/> Crushing	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Positioned Wrong	<input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Drawing
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Off-set		<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Calibration		<input type="checkbox"/> Fit/Function
<input type="checkbox"/> Marks/Chatter		<input type="checkbox"/> Misaligned/off center	<input type="checkbox"/> Out of Sequence		<input type="checkbox"/> Turning Sequence				
<input type="checkbox"/> Turning Sequence		<input type="checkbox"/> Mislabeled			<input type="checkbox"/> Wave/Twist in Tube				
<input type="checkbox"/> Wave/Twist in Tube		<input type="checkbox"/> Misread							

Picklist Print

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Page 1

Work Order ID: 124259

124259

Parent Item: D3639-1

D3639-1

Parent Item Name: Doubler

Start Date: 9/10/14

Required Date: 9/10/14

Start Qty: 4.00

Required Qty: 4.00

Comments: IPP Rev:A New Issue 07-07-20 JLM Verified By:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M2024T3S.050		Purchased	No			100	sf	89.8911	0.239	2		**	

M2024T3S.050

2024-T3 .050 sheet

Location	Loc Qty	Loc Code
MAT022	89.8911	
124643	37.2911	
m128354	42.2	
m128713	10.4	

1666

02/14/10/19

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: Date: _____

Work Order update only

Work Order: _____	DISPOSITION			AGAINST DEPARTMENT/PROCESS					
Part No. _____	Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
NCR No. _____	Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
	Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
	Suspected Unapproved <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear	General								
Bending <input type="checkbox"/>	Bend <input type="checkbox"/>	Folio/Program <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>					
Centre Not Concentric <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Grain <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Set-up <input type="checkbox"/>					
Cracks <input type="checkbox"/>	Broken/Damage/Defect <input type="checkbox"/>	Hardware <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>					
Crimp/Kink/Ripple/Wave <input type="checkbox"/>	Burrs <input type="checkbox"/>	Inspection Incomplete/Unqualified <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Weld <input type="checkbox"/>					
Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Moved <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>					
Crushing <input type="checkbox"/>	Countersink <input type="checkbox"/>	Misaligned/off center <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>						
Heat Treat <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>	Other <input type="checkbox"/>					
Inspection Strip in Tube <input type="checkbox"/>	Drawing <input type="checkbox"/>	Misread <input type="checkbox"/>							
Marks/Chatter <input type="checkbox"/>	Drill Holes <input type="checkbox"/>	Off-set <input type="checkbox"/>							
Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>							
Wave/Twist in Tube <input type="checkbox"/>	Fit/Function <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>							

DART AEROSPACE LTD	Work Order:	124259
Description: Doubler	Part Number:	D3639-1
Inspection Dwg: D3639	Rev: A	Page 1 of 1

FIRST ARTICLE INSPECTION CHECKLIST

X First Article Prototype

DAS

Measured by:	<u>DK 14/14/14</u>	Audited by:	<u>38</u> 9-89	Prototype Approval:	N/A
Date:		Date:	OCT 20 2014	Date:	N/A

Rev	Date	Change	Revised by	Approved
A	07.10.19	New Issue	KJ/EC/DD	

8

7

6

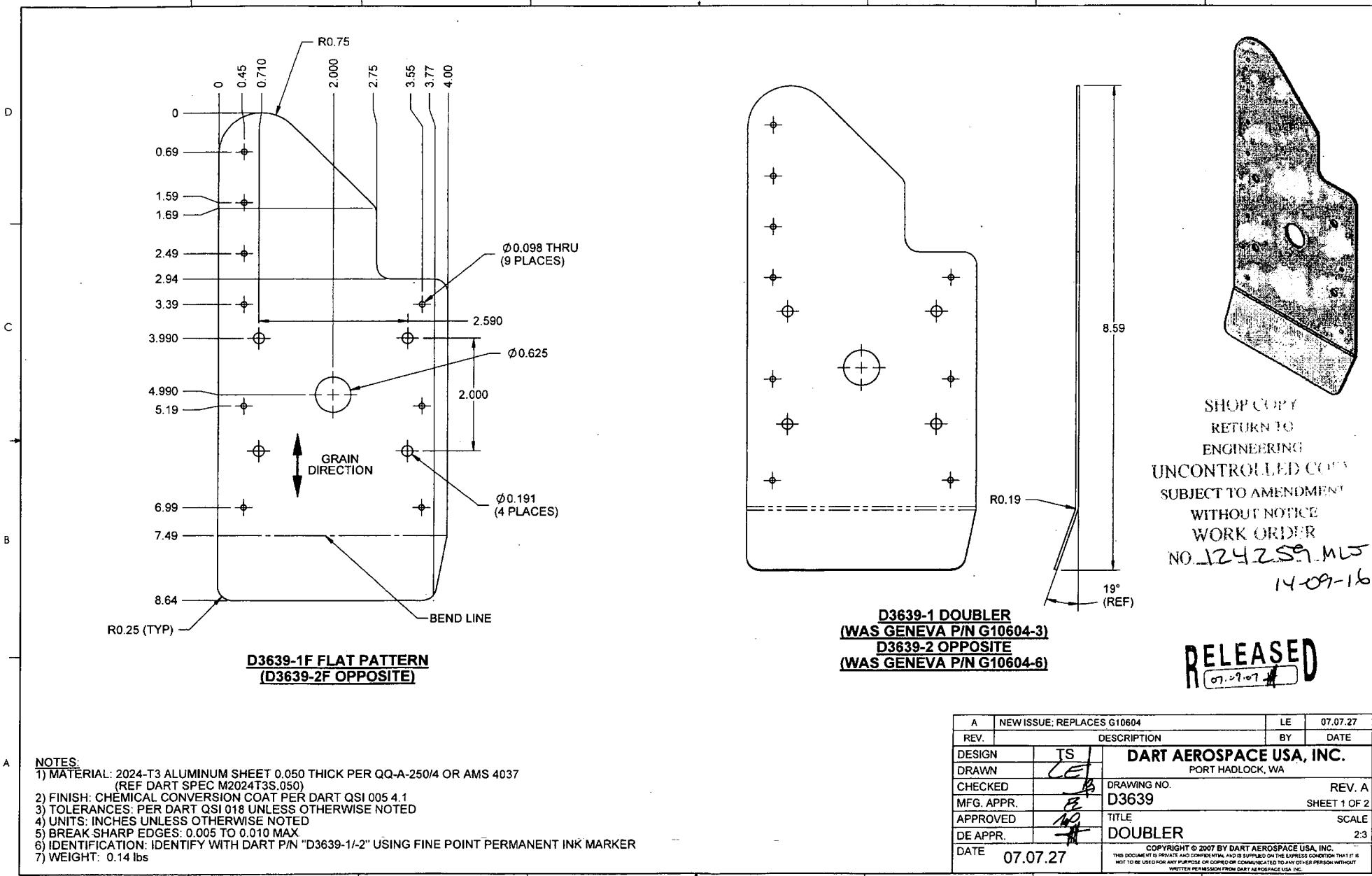
5

4

3

2

1



8

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5

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2

1

